

RECEIVED

**State of Ohio**  
**Office of Housing and Community Partnerships**  
**Request for Payment and Status of Funds Report**

MAY 11 2015

## OCD

## Section One: Request for Payment

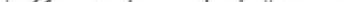
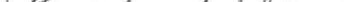
Submit to: Ohio Development Services Agency Office of Community Development P.O. Box 1001 Columbus, Ohio 43216-1001	Name and Address of Grantee: Coleman Professional Services 5982 Rhodes Road Kent, Ohio 44240	
Contact Person/Telephone Number: Mary Dague, 330-676-8036	Community/Nonprofit # 7GJ	State Use Only 5-12-15
FTI Number: [REDACTED]	Draw Number: 51 63	Date: Voucher #: Warrant #: 00290115 0029579850

## Section Two: Itemization of Expenditures

\* NOTE: From the Attachment A of the Grant Agreement

**Section Three: Certification of Itemization of Expenditures: Two Authorized Signatures Are Required**

I certify that this Request for Payment was drawn in accordance with the terms and conditions of the Grant Agreement(s) cited and that the amount drawn is proper for payment to the drawer's depository. I also certify that the data reported above is correct and that the amount of the Request for Payment is not in excess of current needs.

Date: 4/28/15	Signature 	Title Billing Supervisor
Date: 4/28/15	Countersignature 	Title Billing Coordinator

**State Use Only**

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

DS5 (Rev. 6/04) DEV0072

**DEVELOPMENT SERVICES AGENCY  
CODING TRAVELER**

VOUCHER NO.		INVOICE NUMBER				LAST RECEIPT DATE			Prepared by:		
		HCPN00637GJ				05/01/2015					
						OAKS VENDOR NO.					
						0000053123					
COLEMAN PROFESSIONAL SERV 5982 Rhodes Road Kent OH 44240-						ADD CODE			TOTAL AMOUNT		
						02 - Check			+		\$162,500.00
LN#	FUND	ACCOUNT	ALI	DEPT #	PROGRAM	GRANT/PROJ	SERVICE LOCATION	REPTING	PROJECT	CROSS REF	BUDGET REF
01	6460	550054	195638	DEV201100	4052C		C0067	DEVLHC1			
PURCHASE ORDER NO.						Line No	S-L-14-7GJ-2 2015			LINE AMOUNT	
0000023971						01-1-1				+	
LN#	FUND	ACCOUNT	ALI	DEPT #	PROGRAM	GRANT/PROJ	SERVICE LOCATION	REPTING	PROJECT	CROSS REF	BUDGET REF
02											
PURCHASE ORDER NO.						Line No				LINE AMOUNT	
										+	
LN#	FUND	ACCOUNT	ALI	DEPT #	PROGRAM	GRANT/PROJ	SERVICE LOCATION	REPTING	PROJECT	CROSS REF	BUDGET REF
03											
PURCHASE ORDER NO.						Line No				LINE AMOUNT	
										+	
LN#	FUND	ACCOUNT	ALI	DEPT #	PROGRAM	GRANT/PROJ	SERVICE LOCATION	REPTING	PROJECT	CROSS REF	BUDGET REF
04											
PURCHASE ORDER NO.						Line No				LINE AMOUNT	
										+	
LN#	FUND	ACCOUNT	ALI	DEPT #	PROGRAM	GRANT/PROJ	SERVICE LOCATION	REPTING	PROJECT	CROSS REF	BUDGET REF
05											
PURCHASE ORDER NO.						Line No				LINE AMOUNT	
										+	
LN#	FUND	ACCOUNT	ALI	DEPT #	PROGRAM	GRANT/PROJ	SERVICE LOCATION	REPTING	PROJECT	CROSS REF	BUDGET REF
06											
PURCHASE ORDER NO.						Line No				LINE AMOUNT	
										+	
<b>PAYMENT HANDLING INSTRUCTIONS</b>											
<input checked="" type="checkbox"/> Return Warrant to Agency (If box is not checked warrant will be mailed centrally) Payment Returns: <input type="checkbox"/> Net 30 <input checked="" type="checkbox"/> Pay Now (If a selection is not made the payment terms will default to Net 30)											
Remittance Narrative: (70 Characters) Grant#, Invoice #, Account #											
S-L-14-7GJ-2											
<b>APPROVED FOR PAYMENT BY MATT LAMANTIA</b>											
Division Use: Approved for Payment						Fiscal Use: Approved for Payment					
SIGNATURE/DATE <u>Matt Lamantia</u> DATE						<u>2015</u> DATE					

Warrant Date: 05/12/2015

Vendor Number: 0000053123

Warrant No: 0029572816

Invoice Number	Voucher ID	Gross Amount	Discount Taken	Late Charge	Paid Amount
HCPN00637GJ	00290115	162500.00	0.00	0.00	162500.00



Warrant Number	Date	Total Gross Amount	Total Discounts	Total Late Charges	Total Paid Amount
0029572816	05/12/2015	\$162,500.00	\$0.00	\$0.00	\$162,500.00

PLEASE TEAR AT PERFORATION BEFORE CASHING CHECK.

THIS IS OHIO WATERMARKED PAPER - DO NOT ACCEPT WITHOUT NOTING OHIO WATERMARK - HOLD TO LIGHT TO VERIFY OHIO WATERMARK

Development Services Agency  
 Budget & Finance  
 77 S. High Street 27th Floor  
 Columbus OH 43215-6130  
 (614)466-5355

Date 05/12/2015 Fund 503 Warrant No. 0029572816 26 RA

25 - 217 / 440

223

Pay Amount \$162,500.00\*\*\*

Pay

\*\*\*\*ONE HUNDRED SIXTY-TWO THOUSAND FIVE HUNDRED AND 00/100 DOLLARS \*\*\*\*

To The  
Order Of

COLEMAN PROFESSIONAL SERVICES INC

5982 RHODES RD  
KENT, OH 44240

Timothy S. Keen, Director  
 Office of Budget Management

VOID AFTER 90 DAYS

1016250000 1044002174 503150595728161226